



SUMMARY OF WAGES AND CONTRIBUTIONS PAID

INSTRUCTIONS: TYPE OR FILL IN YOUR INFORMATION IN THE APPROPRIATE FIELDS			
EMPLOYER INFORMATION			
EMPLOYER NAME		REPORTING QTR:	
ADDRESS:		TOTAL REPORTING EMPLOYEES:	
CITY:	STATE:	ZIP:	EMPLOYER NUMBER:
WAGE & CONTRIBUTION INFORMATION			
1. TOTAL WAGES			
2. EMPLOYER RATE			
3. EMPLOYER CONTRIBUTIONS			
4. TOTAL EMPLOYEE CONTRIBUTIONS			
4A. MANDATORY EMPLOYEE PRE-TAX CONTRIBUTIONS			
4B. MANDATORY EMPLOYEE POST-TAX CONTRIBUTIONS			
5. VOLUNTARY CONTRIBUTIONS			
6. FSP/HEP WAGES			
7. FSP/HEP CONTRIBUTIONS			
8. TOTAL SERVICE			
9. TOTAL RECIEVABLE			
10. TOTAL PAYABLE			
11. TOTAL REMITTANCE			
EMPLOYEE CERTIFICATION			
SIGNATURE		BUSINESS TELEPHONE NO.	
TITLE		DATE (MM/DD/CCYY)	